

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)  
031553-10

In re Application of Oliver HORN et al.

Application Number 10/658,746

Filed 09-10-2003

For DEVICE FOR CLIMATE CONTROL OF A DRIVER'S BED

Group Art Unit 3744

Examiner John K. Ford

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows  
(check time period desired):

- ☒ One month (37 CFR 1.17(a)(1)) - (\$60/\$120) \$120.00
- ☐ Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) \$
- ☐ Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) \$
- ☐ Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) \$
- ☐ Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) \$

- ☐ Applicant claims small entity status.
- ☐ A check to cover the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2478(031553-10).  
I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor

- ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

  
\_\_\_\_\_  
Signature

October 17, 2006

\_\_\_\_\_  
Date

David S. Safran

703-584-3273

\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

SEND TO: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450